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CONFIRMATION NO. 1913

<b>SERIAL NUMBER</b> 10/810,928	<b>FILING OR 371(c) DATE</b> 03/25/2004 <b>RULE</b>	<b>CLASS</b> 210	<b>GROUP ART UNIT</b> 1723	<b>ATTORNEY DOCKET NO.</b> MARVIN-44115
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## APPLICANTS

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## \*\* CONTINUING DATA \*\*\*\*\* DR

This application is a CIP of 10/270,995 10/14/2002 PAT 6,797,181 and claims benefit of 60/459,422 03/31/2003

## \*\* FOREIGN APPLICATIONS \*\*\*\*\* NONE

## IF REQUIRED, FOREIGN FILING LICENSE GRANTED \*\*

06/10/2004

## \*\* SMALL ENTITY \*\*

Foreign Priority claimed <input type="checkbox"/> yes <input checked="" type="checkbox"/> no	<b>STATE OR COUNTRY</b> CA	<b>SHEETS DRAWING</b> 4	<b>TOTAL CLAIMS</b> 26	<b>INDEPENDENT CLAIMS</b> 3
35 USC 119 (a-d) conditions met <input type="checkbox"/> yes <input checked="" type="checkbox"/> no <input type="checkbox"/> Met after Allowance				
Verified and Acknowledged Examiner's Signature <u>David A. Ruffenberger</u> Initials <u>DR</u>				

## ADDRESS

26252

## TITLE

Adjustable contaminated liquid mixing apparatus

<b>FILING FEE RECEIVED</b> 439	FEES: Authority has been given in Paper No. _____ to charge/credit DEPOSIT ACCOUNT No. _____ for following:	<input type="checkbox"/> All Fees <input type="checkbox"/> 1.16 Fees ( Filing ) <input type="checkbox"/> 1.17 Fees ( Processing Ext. of time ) <input type="checkbox"/> 1.18 Fees ( Issue ) <input type="checkbox"/> Other _____ <input type="checkbox"/> Credit
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